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TO: EXAMINER: D.J. Loney - United States Patent and Trademark Office

Fax No. 571-273-8300

Phone No. 571-272-1493

FROM: Connie Baker (Typed or printed name of person signing Certificate)

Fax No. 513-634-3612

Phone No. 513-634-5392

Application No.: 10/700,131

Inventor(s):

Ellyne Elizabeth Prodoehl

Filed:

November 3, 2005

Docket No.:

9408

Confirmation No.: 3708

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- 2) Petition for Extension of Time Pursuant to 37 C.F.R. §1.1363(a)
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4)

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PTO/SE/17 (12-04) FEE TRANSMITTAL Complete if Known for FY 2005 Application Number 10/100,131 Patent fees are subject to annual revision. Confirmation Number 3708 Effective December 8, 2004 Filing Date November 3, 2003 First Named Inventor Ellyne Elizabeth Prodoehl Examiner Name D.J. Loney Art Unit 1772 TOTAL AMOUNT OF PAYMENT (\$)450 Attorney Docket No. 9408

METHOD OF PAYMENT	FEE CALCULATION (continued)			
1. [X] The Director is hereby authorized to charge indicated fees	5. ADDITIONAL FEES			
submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this	Fee Description	Fee Paid		
application to:	Extension for reply within 1st month (\$12			
Deposit Account Number: 16-2480	Extension for reply within 2 nd month (\$45)	0) [X]		
Deposit Account Name: The Procter & Gamble Company	Extension for reply within 3rd month (\$1.0)20) []		
	Transport of the set	190) []		
FEE CALCULATION	"	60) []		
2. BASIC FILING FEE - Large Entity		_		
FILING SEARCH EXAMINATION FEE FEE FEE	Information Disclosure Statement fee (\$180	D) []		
Application	37 CFR 1.16(f) Late Oath/Declaration			
Type Fee Paid	1 4 1 6			
Utility (\$300) (\$500) (\$200)	(nonprovisional) (\$130	ם (כ		
(Total = \$1000)	37 CFR 1.17 (g) Surcharge - Late provisional			
Design (\$200) (\$100) (\$130)	filing fee or cover sheet (\$50)	_		
(Total = \$430)	Non-English specification (\$130)) []		
Reissue (\$300) (\$500) (\$600)	Notice of Appeal (\$500	· •		
(Total = \$1400) []	Notice of Appeal (\$500) []		
Provisional filing fee (Total = \$200)	Filing a brief in support of an appeal (\$500	ם כ		
3. APPLICATION SIZE FEE:	Request for oral hearing (\$1.00	ю п		
Sheets of Spec and Drawings		~,		
(\$250 for each 50 sheets in excess of 100, except for sequence and program listings)	Acceptance of unintentionally delayed claim for priority			
SUBTOTAL (2)+(3) (5)[]	under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) (\$1,37			
4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:	Other:	0		
Extra Fee from Fee				
Claims Below Paid				
Total Claims [] - 20** = [] x [] = []		j		
Independent Claims $(1 - 3^{**} = 1) \times (1 - 3)$		l		
Multiple Dependent claims:				
** or number previously paid, if greater; For Reissues, see below				
Fee Description Claims in excess of 20 (\$50 per claim)				
Independent claims in excess of 3 (\$200 per claim)		1		
Multiple dependent claim, if not paid (\$360)				
**Reissue: each independent claim over 3 and more than in the		•		
original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent		j		
(\$50 per claim)		ļ.		
SUBTOTAL (4) (\$)[]	SUBTOTAL(5)	(\$) [450]		
	SUBTOTAL(5)	(3) [430]		

SUBMITTED BY					Complete (if applicable)	
Name (Print/Type)	B.J. ZEA	Registration No. (Attorney/Agent)	36,069	Telephone	(513) 634-5392	
Signature	Betty 1. To			Date	February 13, 2006	

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